

4/18/12

Division of Corporations

Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850) 617-6383

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Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
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Email Address: samjhamm@yahoo.com

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TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.

Shen's Medispa LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12 APR 18 AM 9:48

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G. MCLEOD

APR 19 2012

EXAMINER

H12000104172

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Shen's Medispa LLC**

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

3950 US 17-92

Casselberry, FL 32707

Mailing Address:

3950 US 17-92

Casselberry, FL 32707

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

The name and Florida street address of the registered agent are:


Fenglian Shen
Name

8387 NW 38th Street
(P.O. Box or Mail Drop Box NOT Acceptable)

Cooper City, FL 33024
(City / State / Zip)

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TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.


Registered Agent's Signature - Fenglian Shen

ARTICLE IV - Manager(s) or Managing Member(s):

H12000104172

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

Felqian Shen - 8387 NW 38th Street, Cooper City, FL 33024

(Use attachment if necessary)

REQUIRED SIGNATURE:


Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Felqian Shen

Typed or printed name of signer